UNITED STATES DISTRICT COURT

For The Middle District of North Carolina

Q_{Plaintiff(s)}

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Erve Placke rancine Davis anna Mills Wagoner

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.

(to be filled in by the Clerk's Office,

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint

A. The Plaintiff(s)

needed.

B.

All other names by which you have been known: ID Number Current Institution Address				
ID Number Current Institution				
Current Institution				
Address		- θ.		
	615 Pine	Stre	et	
	Wellevill	٤	Kansas	66092
	City		State	Zip Code
The Defendant(s)				
Provide the information below for individual, a government agency, listed below are identical to those the person's job or title (if known) a individual capacity or official cap	an organization, or a contained in the aboand check whether yo	corporation ve caption u are bring	on. Make sure tha . For an individua ging this complain	at the defendant(s) al defendant, include at against them in their
Defendant No. 1	C ' D/	1 1		
Name	Euc Pl	ache		
Job or Title (if known)	Assistant	Feder	al Public	Defender
Shield Number				<i>V</i>
Employer	Federal Pul	flix De	Lender Mida	lle District of North
Address	301 Nort	h El	m storest	Suite 41B
	Greensbor			27401
	City		State	Zip Code
	Individual ca	apacity	Official capac	city
Defendant No. 2		•	4	
Name	Douglas	Cann	on and Rol	bert Hamilton
Job or Title (if known)	Proceeute	ns		
Shield Number				
Employer				
Address	Roth Guos	nebour	N) C BAQ	Works for Government
	Di in Once	,	المالين المالين	DOUGLE GOODEN
	City		State	Zip Code
	Individual ca	nacity	Official capac	-

Provide the information below for each plaintiff named in the complaint. Attach additional pages if

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officials?

D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
Priso	ner Status
Indica	ate whether you are a prisoner or other confined person as follows (check all that apply):
	Pretrial detainee
	Civilly committed detainee
	Immigration detainee
	Convicted and sentenced state prisoner
X	Convicted and sentenced federal prisoner
	Other (explain)
Stater	nent of Claim
allege further any ca	as briefly as possible the facts of your case. Describe how each defendant was personally involved in the d wrongful action, along with the dates and locations of all relevant events. You may wish to include r details such as the names of other persons involved in the events giving rise to your claims. Do not cite uses or statutes. If more than one claim is asserted, number each claim and write a short and plain then to feach claim in a separate paragraph. Attach additional pages if needed.
A.	If the events giving rise to your claim arose outside an institution, describe where and when they aros
	Accusations Attached and Proven
В.	If the events giving rise to your claim arose in an institution, describe where and when they are

C.	What date and approximate time did the even	its giving rise to your claim(s) occur?
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Accusations Attached and Proven

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

Accusation Attached and Proven

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Accusations Attached and Proven

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Accessations attached and Proven

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
Yes
No No
If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
Yes
No No
Do not know
Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
Yes
No No
Do not know

Yes No f no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility? Yes No f you did file a grievance: Where did you file the grievance? Where did you file the grievance? Where did you file the grievance? Where did you file the grievance?
f no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility? Yes No You did file a grievance:
Yes No if you did file a grievance:
No If you did file a grievance:
If you did file a grievance:
•
Where did you file the grievance? . United Plates Middle Disturl Court of Worth Carden
2. What did you claim in your grievance? Accusations attached and Proven
3. What was the result, if any? Accessations attached and Proven
4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.) Accusallon Atlacked and Proven

VIII.

If y	ou did not file a grievance:
1.	If there are any reasons why you did not file a grievance, state them here:
	Acusation Ottaked and Proven
2.	If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any: Accurations attached and Proven
	ase set forth any additional information that is relevant to the exhaustion of your administrative nedies. Accuration attached and Proven
,	te: You may attach as exhibits to this complaint any documents related to the exhaustion of your ninistrative remedies.)
us La	wsuits
ng fee t an a ous, o	trikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying a fit that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, refails to state a claim upon which relief may be granted, unless the prisoner is under imminent rious physical injury." 28 U.S.C. § 1915(g).
best o	of your knowledge, have you had a case dismissed based on this "three strikes rule"?
es	
)	
state	which court dismissed your case, when this occurred, and attach a copy of the order if possible.
	1. Plearem (Not adm) us La nree sing feet an actus, or of set to best of set to best of set to be set

Hav acti	re you filed other lawsuits in state or federal court dealing with the same facts involved in this on?
	Yes
M	No
If y	our answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is than one lawsuit, describe the additional lawsuits on another page, using the same format.)
1.	Parties to the previous lawsuit
	Plaintiff(s)
	Defendant(s)
2.	Court (if federal court, name the district; if state court, name the county and State)
3.	Docket or index number
4.	Name of Judge assigned to your case
5.	Approximate date of filing lawsuit
6.	Is the case still pending?
	Yes
	No
	If no, give the approximate date of disposition.
7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
	ve you filed other lawsuits in state or federal court otherwise relating to the conditions of your prisonment?

Pro Se 14 (Rev. 1	16) Complaint for Violation of Civil Rights (Prisoner)
	∐ Yes
	No
D.	If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1. Parties to the previous lawsuit
	Plaintiff(s)
	Defendant(s)
	2. Court (if federal court, name the district; if state court, name the county and State)
	3. Docket or index number
	4. Name of Judge assigned to your case
	5. Approximate date of filing lawsuit
	6. Is the case still pending?
	Yes
	☐ No
	If no, give the approximate date of disposition
	7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

IX. **Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

5-14-19

	Date of signing: $5 - 6$	14-18		
	Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address	Steven Eugene Ed Steven Eugene Ed 149750-31 615 Pine Street Welleville	wards Kansa State	66097 Zip Code
В.	For Attorneys			
	Date of signing:			
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number			
	Name of Law Firm			
	Address			
		City	State	Zip Code
	Telephone Number			
	E-mail Address			